

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Heartland Values PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Everist, Thomas, S, ,

Mailing Address 350 S Main Ave
Apt 703

City
Sioux Falls

State
SD

Zip Code
57104-6554

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

L G Everist Inc

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : A91BA2CDF81F042C8B6C

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mickelson, Cynthia, , ,

Mailing Address 2901 S 5th Ave

City

Sioux Falls

State

SD

Zip Code

57105-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SF School Board

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : A137C175EFACF4F0C943

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Everist, Barbara, , ,

Mailing Address 350 S Main Ave
Apt 703

City

Sioux Falls

State

SD

Zip Code

57104-6554

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : AFB1D39899B5B48F19AD

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00